Approved for use though 7/21/2000, OUB 0051-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									19182000		
CLAIMS AS FILED - PART ((Column 1) (Column 2)						SMALL ENTITY			OTHER THAN		
BASIC FEE	<u> </u>	MUMBER FILED		MARSER EXTRA.		RATE	FEE	7		عزبيدل	
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MULTIPLE DEPENDENT CLAIM PRESENT (17 CFR L N(Q)						<u> </u>	<u> </u>	」 œ	. +5:	.:	
" If the difference in column 1 is less than Zero, enter "O" in column 2,						TOTAL	L	OR:	TOTAL		
1 44 -	CLAIMS A	S AMENDE	O - PARTI							<u> </u>	
(Column 1) (Column 2) (Column 3)						SMALL ENTITY			OR OTHER THAN		
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dul	CLAMAS		(Column 2)	(Column 3)	_		<u> </u>				
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(D) CFR 1 NAME	12	Winus	60	1.	K 1_			07		$\overline{\cdot}$	
SHIST PRIESENTATION OF MACTIFLE DEPENDENT CLAIM (37 CFR 1 1541)									× 3 •		
•	•				101/	<u>. </u>		ã T	TOTAL	·	
. If the entry in a		LFEE		OR	ADDIFEE						
" I Pie Tioneu 6	Amno Proci	NUIT PES FOR	IN THIS SPAC	É is less tran 20 e	:105° tahu					1	
- HE LEGUEST NO	Previou	sly Paid For (Total or ladeper	is less than 3, en ident) is the righes	l matthe	found in the	- -			I	

This collection of information is required by 37 CFR 1,14. The information is required to obtain or rotain a benefit by the public which is to the (and by the USPTO to process) an application, Confidentially its governed by 35 U.S. C. 122 and 37 CFR 1,14. This collection is estimated to take 12 minutes to complete, and using gathering, preparing, and submitting the completed application form to me USPTO to the will vary depending upon the individual cost. Any comments on the amount of time you require to complete this form another suggestions for reducing this burden, stought be sent to the Check Information Officer, U.S., Patern and Tradefacts Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450, ON OFFICES OR COMPLETED FORMS TO ITIES.